STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation OF STATE

1. TITLE OF NEWSPAPER DELL RAPIDS TRIE	DELL RAPIDS TRIBUNE	
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH 52	IED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE S 148.40
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF (Not printers)		
200 S. Minnesota Ave, Sioux Fa		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTER PUBLISHER (Not printers) 200 S. Minnesota Av		
CHILL MANIE OF BUBLISHER		ranch Dr. McLean, VA 2210
7. OWNER (If owned by a corporation, its name and address must addresses of stockholders owning or holding 1 percent or more of names and addresses of the individual owners must be given. If of and address, as well as that of each individual must be given. FULL NAME	be stated and list on the foot of total amount of stock owned by a partnership	ne back of this form the names and k. If not owned by a corporation, the
Gannett Co., Inc.	7950 Jones Bra	nch Dr, McLean, VA 22107
 KNOWN BONDHOLDERS, MORTGAGES, AND OTHER PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MO state. If more space is needed, list on back of this form. 	ORTGAGES OR OTH	ER SECURITIES (If there are none, so
9. EXTENT AND NATURE OF CIRCULATION Daily	AVERAGE NO. CO EACH ISSUED PRECEDIN MONTHS	ACTUAL NO. COPIES
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	2,072	1,670
B.PAID AND/OR REQUESTED CIRCULATION Sales through dealers and carriers, street vendors, and counter sales.	164	136
Mail Subscription (Paid and or requested)	151	222
Paid Electronic Copies	0	0
C TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	315	358
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	8	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	323	358
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	1,749	1,405
2. Return from News Agents	0	0
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	2,072	1,670
Statement must be signed by Publisher, Business Manag I swear that the statements made by me are true, co	orrect, and compl	

(Seal)

Form: SOS REC 051 9/2016

County of _

State of South Dakota

RACHAEL ELIZABETH BOWEN
Notery Public, State of Indiana
Hamilton County
Commission Number 708578
My Commission Expires
December 18, 2025

Notary Public

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AND A Performance